

FEC FORM 2
STATEMENT OF CANDIDACY

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1. (a) Name of Candidate (in full) <u>Jensen Bohren</u>		2. FEC Candidate Identification Number <u>58MS00220</u>
(b) Address (number and street) <u>69 The Pines</u>		3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A)
(c) City, State, and ZIP Code <u>Benton, MS 39039</u>		
4. Party Affiliation <u>Democratic</u>	5. Office Sought <u>U.S. Senate</u>	6. State & District of Candidate <u>Mississippi District 22</u>

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2020 election(s).
(year of election)
- NOTE:** This designation should be filed with the appropriate office listed in the instructions.

(a) Name of Committee (in full)
Southern Progressives for Jensen Bohren

(b) Address (number and street)
69 The Pines

(c) City, State, and ZIP Code
Benton, MS 39039

DESIGNATION OF OTHER AUTHORIZED COMMITTEES
(Including Joint Fundraising Representatives)

8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.
- NOTE:** This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

(b) Address (number and street)

(c) City, State, and ZIP Code

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Signature of Candidate

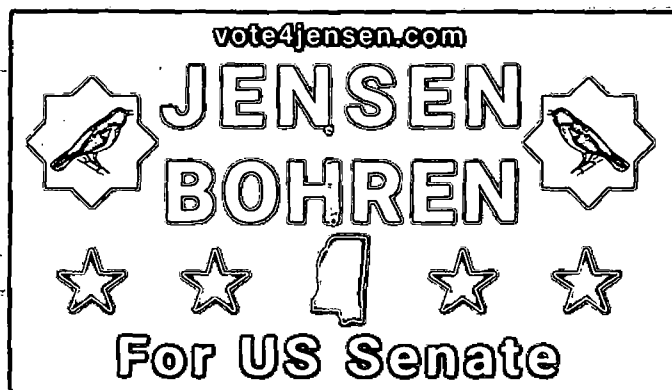
Date

2019.105/01

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 52 U.S.C. §30109.

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NOT TO BE USED FOR ANY OTHER PURPOSE



Priorities

- Election Reform
- Ranked-Choice voting
- Medicare-For-All
- Legalize Marijuana

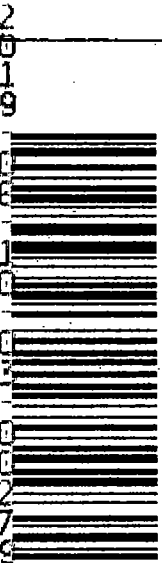
Vote4jensen.com Twitter: @BohrenJensen
facebook.com/vote4jensen

Approved by Jensen Bohren

FROM:

Jensen Bohren
809 The Pines
Benton, MS 39039

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Federal Election Commission
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